## FIRE INSPECTION APPLICATION CITY OF LEESBURG **COUNTY OF LAKE**



Inspection ID #

| Owner's Name  | ;       |     |      |                         |                            |       |       |       |                             |                       |  |
|---|---------|-----|------|-------------------------|----------------------------|-------|-------|-------|-----------------------------|-----------------------|--|
| Owner's Addre   | ess     |     |      |                         |                            |       |       |       |                             |                       |  |
| City  |         |     |      |                         | State                      |       |       |       | Zip                         |                       |  |
| Phone #   |         |     |      | Fax#                    |                            | •     |       | E-Ma  | il                          |                       |  |
| Emergency Contact   |         |     |      | l .                     |                            | Phone | e #   |       |                             |                       |  |
|   |         |     |      |                         |                            |       |       |       |                             |                       |  |
| Tenant's Name   |         |     |      |                         |                            |       |       |       |                             |                       |  |
| Tenant's Addre  | ess     |     |      |                         |                            |       |       |       |                             |                       |  |
| City  |         |     |      | State                   |                            |       |       | Zip   |                             |                       |  |
| Phone #   |         |     |      | Fax #                   |                            |       | E-Mai |       |                             |                       |  |
| Emergency Contact   |         |     |      | Phone #                 |                            |       | e #   |       |                             |                       |  |
|   |         |     |      |                         |                            |       |       | 1     |                             |                       |  |
| Business Nam  | е       |     |      |                         |                            |       |       |       |                             |                       |  |
| Business Addr   | ess     |     |      |                         |                            |       |       |       |                             |                       |  |
| City  |         |     |      |                         | State                      |       |       |       | Zip                         |                       |  |
| Phone #   | •       |     |      | Fax #                   |                            |       |       | E-Mai | ı                           |                       |  |
|   |         |     |      | I.                      | <b>.</b>                   |       |       |       | l .                         |                       |  |
| Current Occupancy Classification  |         |     |      |                         |                            |       |       |       |                             |                       |  |
| Proposed Occupancy Classification   |         |     |      |                         |                            |       |       |       |                             |                       |  |
| Total Square Footage  |         |     |      |                         |                            |       |       |       |                             |                       |  |
| IF CHANGE OF OCCUPANCY, A FLOOR PLAN AND BUILDING PERMIT APPLICATION IS REQUIRED  |         |     |      |                         |                            |       |       |       |                             |                       |  |
| Fire Sprinkler  |         |     |      |                         |                            |       |       |       |                             |                       |  |
| Fire Alarm  |         |     |      |                         |                            |       |       |       |                             |                       |  |
| Fire Suppression System   |         |     |      |                         |                            |       |       |       |                             |                       |  |
| Fire Hood   |         |     |      |                         |                            |       |       |       |                             |                       |  |
|   |         |     |      |                         |                            |       |       |       |                             |                       |  |
| FIRE INSPEC   | TIONS F | EES |      |                         |                            |       |       |       |                             |                       |  |
| Initial & Annual Fire Inspection  |         |     |      | \$ 50.00 minimum charge |                            |       |       |       | Up                          | to 5,0000 square feet |  |
| \$ 25.00 per 2,500 square feet after 5,000 sf   |         |     | 0 sf | \$75.00                 |                            |       |       |       | 5,001 – 7,500 square feet   |                       |  |
|   |         |     |      | \$100.00                |                            |       |       |       | 7,501 – 10,000 square feet  |                       |  |
|   |         |     |      | \$125.00                |                            |       |       |       | 10,001 - 12,500 square feet |                       |  |
| Re-Inspections  |         |     |      | First                   |                            |       |       |       | No Charge                   |                       |  |
| -   |         |     |      | Second                  |                            |       |       |       | \$ 50.00                    |                       |  |
|   |         |     |      | Third and Additional    |                            |       |       |       | \$ 100.00 each              |                       |  |
|   |         |     |      |                         |                            |       |       |       |                             |                       |  |
| The signature below certifies that I have read and understand the permit application, checklist and procedures contained herein, and that this application is submitted in accordance with the checklist and procedures for the limited use permit requested. |         |     |      |                         |                            |       |       |       |                             |                       |  |
|   |         |     |      |                         |                            |       |       |       |                             |                       |  |
| Print Name – Owner / Tenant   |         |     |      |                         | Signature – Owner / Tenant |       |       |       |                             | Date                  |  |